

CLAIMS ONLY

SERIAL NO.

09775507

FILING DATE

02-05-01

APPLICANT(S)

CLAIMS

192

203

236

247

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		1				
4		1				
5		1				
6		1				
7		1				
8		1				
9		1				
10		1				
11		1				
12	1					
13		1				
14		1				
15		1				
16		1				
17		1				
18		1				
19		1				
20		1				
21		1				
22		1				
23	1					
24		1				
25		1				
26		1				
27		1				
28		1				
29		1				
30		1				
31		1				
32		1				
33		1				
34	1					
35		1				
36		1				
37		1				
38		1				
39		1				
40		1				
41		1				
42		1				
43		1				
44		1				
45	1					
46		1				
47		1				
48		1				
49		1				
50		1				
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51		1				
52		1				
53		1				
54		1				
55		1				
56	1					
57		1				
58		1				
59		1				
60		1				
61		1				
62		1				
63		1				
64		1				
65		1				
66		1				
67						
68						
69						
70						
71						
72						
73						
74						
75						
76						
77						
78						
79						
80						
81						
82						
83						
84						
85						
86						
87						
88						
89						
90						
91						
92						
93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.	6	↓		↓		↓
TOTAL DEP.	60	←		←		←
TOTAL CLAIMS	66					

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-876)**

SERIAL NO.

07715507

FILING DATE

03-05-01

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	✓					
2		✓				
3		✓				
4		✓				
5		✓				
6		✓				
7		✓				
8		✓				
9		✓				
10		✓				
11		✓				
12		✓				
13		✓				
14		✓				
15		✓				
16		✓				
17		✓				
18		✓				
19		✓				
20		✓				
21		✓				
22		✓				
23		✓				
24		✓				
25		✓				
26		✓				
27		✓				
28		✓				
29		✓				
30		✓				
31		✓				
32		✓				
33		✓				
34		✓				
35		✓				
36		✓				
37		✓				
38		✓				
39		✓				
40		✓				
41		✓				
42		✓				
43		✓				
44		✓				
45		✓				
46		✓				
47		✓				
48		✓				
49		✓				
50		✓				
TOTAL IND.		↓		↓		↓
TOTAL DEP.	←		←		←	
TOTAL CLAIMS						

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51		✓				
52		✓				
53		✓				
54		✓				
55		✓				
56	✓					
57		✓				
58		✓				
59		✓				
60		✓				
61		✓				
62		✓				
63		✓				
64		✓				
65		✓				
66		✓				
67		✓				
68		✓				
69		✓				
70		✓				
71		✓				
72		✓				
73		✓				
74		✓				
75		✓				
76		✓				
77		✓				
78		✓				
79		✓				
80		✓				
81		✓				
82		✓				
83		✓				
84		✓				
85		✓				
86		✓				
87		✓				
88		✓				
89		✓				
90		✓				
91		✓				
92		✓				
93		✓				
94		✓				
95	✓					
96		✓				
97		✓				
98		✓				
99		✓				
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.	←		←		←	
TOTAL CLAIMS						

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

09775507

FILING DATE

02-05-01

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
101		✓					151		✓				
102		✓					152		✓				
103		✓					153		✓				
104		✓					154		✓				
105		✓					155		✓				
106		✓					156		✓				
107		✓					157		✓				
108		✓					158		✓				
109		✓					159		✓				
110		✓					160		✓				
111		✓					161		✓				
112		✓					162		✓				
113		✓					163		✓				
114		✓					164		✓				
115		✓					165		✓				
116		✓					166		✓				
117		✓					167		✓				
118		✓					168		✓				
119		✓					169		✓				
120		✓					170		✓				
121		✓					171		✓				
122		✓					172		✓				
123		✓					173		✓				
124		✓					174		✓				
125		✓					175		✓				
126		✓					176	✓					
127		✓					177		✓				
128		✓					178		✓				
129		✓					179		✓				
130		✓					180		✓				
131		✓					181	✓					
132		✓					182		✓				
133		✓					183	✓					
134		✓					184		✓				
135		✓					185	✓					
136	✓						186		✓				
137		✓					187		✓				
138		✓					188		✓				
139		✓					189		✓				
140		✓					190		✓				
141		✓					191		✓				
142		✓					192						
143		✓					193						
144		✓					194						
145		✓					195						
146		✓					196						
147		✓					197						
148		✓					198						
149		✓					199						
150		✓					200						
TOTAL IND.		↓		↓		↓	TOTAL IND.		↓		↓		↓
TOTAL DEP.		↓		↓		↓	TOTAL DEP.		↓		↓		↓
TOTAL CLAIMS							TOTAL CLAIMS						